

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	None
Suggested Group Art Unit::	None
CD-ROM or CD-R?::	None
Number of CD disks::	0
Number of copies of CDs::	0
Sequence submission?::	No
Computer Readable Form (CRF)?::	No
Number of copies of CRF::	0
Title::	METHODS FOR TREATING LOWER URINARY TRACT DISORDERS AND THE RELATED DISORDERS VULVODYNIA AND VULVAR VESTIBULITIS USING CAV2.2 SUBUNIT CALCIUM CHANNEL MODULATORS
Attorney Docket Number::	046562/274659
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	No
Total Drawing Sheets::	3
Small Entity::	Yes
Petition Included?::	No
Petition Type::	None
Licensed US Govt. Agency::	No
Contract or Grant Numbers::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Matthew Oliver
Family Name:: Fraser
Name Suffix::
City of Residence:: Apex
State or Province of Residence:: NC
Country of Residence:: US
Street of mailing address:: 408 Gablefield Lane
City of mailing address:: Apex
State or Province of mailing address:: NC
Country of mailing address:: USA
Postal or Zip Code of mailing address:: 27502

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Karl Bruce
Family Name:: Thor
Name Suffix::
City of Residence:: Morrisville
State or Province of Residence:: NC
Country of Residence:: US
Street of mailing address:: 109 Draymore Way
City of mailing address:: Morrisville
State or Province of mailing address:: NC
Country of mailing address:: US
Postal or Zip Code of mailing address:: 27506

Applicant Authority Type:: Inventor
 Primary Citizenship Country:: US
 Status:: Full Capacity
 Given Name:: Edward C.
 Family Name:: Burgard
 Name Suffix::
 City of Residence:: Chapel Hill
 State or Province of Residence:: NC
 Country of Residence:: US
 Street of mailing address:: 215 Cates Farm Road
 City of mailing address:: Chapel Hill
 State or Province of mailing address:: NC
 Country of mailing address:: US
 Postal or Zip Code of mailing address:: 27516

Correspondence Information

Correspondence Customer Number:: 00826

Representative Information

Representative Customer Number:: 00826

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Utility of	60/453,171	03/10/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee name::	Dynogen Pharmaceuticals, Inc.
Street of mailing address::	31 St. James Avenue, Suite 905
City of mailing address::	Boston
State or Province of mailing address::	MA
Country of mailing address::	US
Postal or Zip Code of mailing address::	02116

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